

**STATE OF ARKANSAS  
2005 CONTINUING EDUCATION ANNUAL REPORT FORM**

**INSTRUCTIONS:** List all STRUCTURED activities in which you participated that can be used for continuing education credit. You may duplicate this form if necessary. It is important that enough detail is given to justify the credit claimed and its relationship to the practice of architecture. **ALL CONTINUING EDUCATION HOURS MUST BE VERIFIED FROM A THIRD PARTY. SELF REPORTING HOURS WILL NOT COUNT TOWARD YOUR CE REQUIREMENTS.**

**ALL DOCUMENTATION THAT SUBSTANTIATES YOUR CONTINUING EDUCATION MUST BE INCLUDED WITH THIS REPORT FORM. IF SUPPORTING DOCUMENTATION IS NOT INCLUDED, YOUR RENEWAL WILL BE RETURNED AS DEFICIENT.**

**Supporting documentation must include one of the following:**

1. A copy of an official AIA transcript not to include self reporting hours;
2. A copy of a course certificate that includes the registrant's name, date of course and number of hours completed;
3. A copy of an official NCARB monograph certificate; or
4. An official verification from course sponsor which includes registrant's name, date of course and number of hours completed.

**STRUCTURED HEALTH, SAFETY, & WELFARE HOURS (8 HOURS MINIMUM)**

DATE	COURSE TITLE	LOCATION	HOURS
1.			
2.			
3.			
4.			
5.			
6.			

**STRUCTURED ELECTIVE HOURS (4 HOURS MAXIMUM)**

DATE	COURSE TITLE	LOCATION	HOURS
1.			
2.			
3.			
4.			

If you are an out-of-state registrant and have participated in Alabama, Florida, Illinois, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Nebraska, New Mexico, New Jersey, New York, North Carolina, Oklahoma, Oregon, Puerto Rico, Rhode Island, South Carolina, South Dakota, Texas, Vermont, West Virginia or Wyoming's mandatory continuing education program, you do not have to complete the Arkansas program. **However, you must send in a copy of a current license from that state or documentation that you have satisfied a continuing education program in another state.**

**NOTE:** This option does not apply to In-State Registrants.

If you are a first time registrant, you are exempt from continuing education for this renewal period. Please place your license number in the blank: \_\_\_\_\_

If you are exempt from continuing education because of a personal hardship, you must **attach** a copy of the letter from the Board which granted you a personal hardship.

**NOTE:** All requests for hardship must be received in the Board Office by June 1 of each year.

**I certify and affirm that I have participated in the above listed continuing education activities during the period August 1, 2003 to July 31, 2004.**

\_\_\_\_\_  
Signature of Registrant